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CONFIRMATION NO. 2602

Bib Data Sheet

SERIAL NUMBER 10/065,063	FILING DATE 09/13/2002 RULE	CLASS 707	GROUP ART UNIT 2175 2165	ATTORNEY DOCKET NO. U01-0043(15)
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APPLICANTS

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** CONTINUING DATA None NA

** FOREIGN APPLICATIONS None NA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 09/24/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NC	SHEETS DRAWING 4	TOTAL CLAIMS <u>2722</u>	INDEPENDENT CLAIMS <u>18</u>
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Verified and Acknowledged
 Examiner's Signature: [Signature] Initials: NA

ADDRESS
 24239
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TITLE
 Method of searching-by-number and device including a search-by-number feature

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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